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THE
Hampden Hippocrat

JULY—AUGUST 1992

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The official bulletin for The Hampden District of the Massachusetts Medical Society. Founded in 1942 by Edward P. Bagg, Jr., M.D. and William A. R. Chapin, M.D.

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HAMPDEN DISTRICT MEDICAL SOCIETY 1992-1993 SEASON

DISTRICT MEETING

PLACE: **THE DELANEY HOUSE**
Route 5 at Smith's Ferry
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DATE: Tuesday, September 22, 1992

BUSINESS MEETING: 6:00 p.m.

SOCIAL HOUR: 7:00 p.m.

DINNER: 7:30 p.m., SPOUSES ARE WELCOME!

SPEAKER: WILLIAM E. CALLAHAN, M.D., President
Massachusetts Medical Society

SUBJECT: Update On Mass. Medical Society
and
Domestic Violence

NOTE: If you must cancel your dinner reservation, please call the HDMS office before noon on September 22nd. If the cancellation is not made, you will be BILLED for your dinner.

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From the Editors

This special issue of the **Hampden Hippocrat** would not have been possible without the hard work of Dr. Murray Watnick. His efforts to educate himself about health care problems "right here at home" will benefit his colleagues and the community at large we believe. Carol Nystrom, our executive secretary, also was invaluable to us in her tireless transcription of the Task Force meetings. ■

Brigid Glackin, M.D.
Donald J. Higby, M.D.
Co-editors

Correction

Marla Allisan wants interested professionals to contact her regarding issues in the diagnosis and treatment of sexual abuse. She can be reached through the Outpatient Department of Psychiatry at Baystate Medical Center. Her telephone number was incorrectly given in the last issue. The correct number is 784-5400. ■

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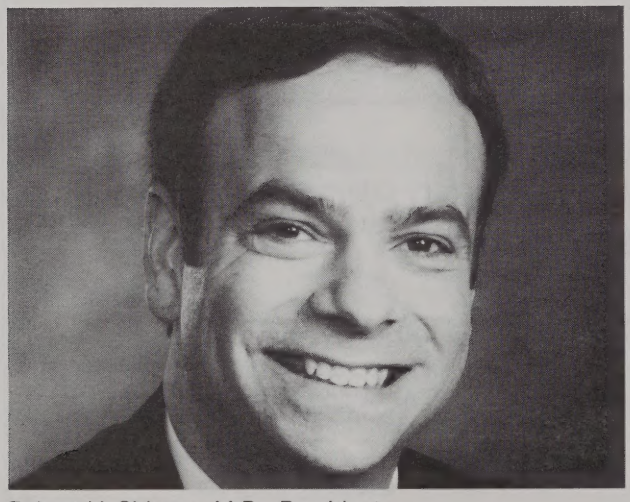
Gameplan

Ten years seems a very short time to achieve any perspective of Medicine, the American Healthcare System, Government, Tort Reform, Third Party Payers, and the like, especially when that can be only a hobby compared to providing good care to patients. Yet each of us must, and does, reach his or her own opinions, conclusions, recommendations for improvement. Another ten years would do the trick I tell myself, but already I'm worried that things are happening too quickly to permit that kind of success.



Robert V. Chircop, M.D., President

TORT REFORM has been a burning issue for us in Hampden County for quite some time. The statewide crisis of several years ago brought several changes in the law—not all of us were impressed with the package at the time. Our subsequent experience with premiums has been surprisingly good, although we guess that JUA investment income and our collective claims experience in this interval were just as influential as the Tort Reform package in keeping premiums level. Yet the business of Tort Reform is not over. Court watchers warn that claims are on the rise again. This summer the JUA is back at the Insurance Commissioner's door requesting a 14% rate hike. Defensive medicine still costs the States, the Federal Government, and the American people enormous sums of wasted money and resources.

We the physicians of Massachusetts are still ultimately responsible for any and all losses/deficits the JUA may ultimately incur, yet we are not the ones setting policy at JUA. We of the Massachusetts Medical Society still must expend our own resources every year to ensure that malpractice premiums are equitable and appropriate—reduplicating processes at the JUA and at the Commissioner's office.

Our state arm, the Massachusetts Medical Society, continues to be very active in the arena of Tort Reform. Dr. Barry Manuel's proposed No-Fault plan failed in the General Court last session, but that effort continues. Mass. Med.'s legislation to take over JUA for its members also failed, but this year new authorizing legislation is needed to renew the JUA, and the M.M.S. is working with legislators to achieve controlling interest by the insured physicians in that organization's Directing Board. I think we should all agree that anything less is unacceptable.

I think we can expect to gradually be more successful in this and other similar endeavors as time passes. This impression is based on the fact that our Medical Societies, years ago, turned their attentions away from the litigious approach, in favor of establishing a close constructive, working relationship with the Executive and Legislative Branches, and with the Public, our patients. This has been, and is, a slow process, as years of neglect won't be undone overnight.

We in Hampden County, and in each of the Districts of the M.M.S., have untold opportunity

to help this process, through our District's committee and Public Relations work. We must ensure that our local State Legislators know us, that they have our support, that they know our positions on all the issues, and that they can rely on our advice. THEY MUST SEE THAT WE SERVE THE PUBLIC GOOD.

The Hampden District Medical Society has approached this task through several initiatives, new and old, in recent time. The Legislative Breakfasts have been revamped and redirected in the last two years, and their future successes will be enhanced by more and more attendance. We should hold these more often. The "House Calls" Television programs are an enormous success, and an enormous vehicle to reach the public. Members' enthusiastic participation in these events is critical, and has been excellent so far. As future programs touch on your areas of expertise, please look forward to participating—it's a great experience. Committee work is going to begin involving more public "outreach" by members—the Medico-Legal Committee is very actively meeting with the legal community, and members will be making visits to area schools for "role-model" purposes. The Health Care Access Task Force, in its formative stages, will be meeting with many area civic groups and leaders over time as it pursues many problems in the local medical-social milieu; additional interested members are needed to participate. The Public Relations Department and our staff have just completed the second annual very successful "Don't Smoke" poster contest with the Springfield Public Schools. The goodwill created by that program alone is immeasurable, and the message will make a lasting impression on the kids. I look forward to including additional towns and cities in the county in the future.

Last for now, but not least, members should happily support their favorite candidates for public office, large and small. This is indeed the American way, and let's face it, our ballot strength is minor.

My bottom line for now is that we can see what our problems are, Tort Reform and the JUA situation being just two of many. We also now see what I consider the proper, productive approach to solving them, and have embarked upon it. The ground work will be an ongoing task requiring wide participation, but will be fulfilling. With the local ground work in place, and ourselves more properly positioned, we will make more progress crafting the solutions. ■

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Health Care Access Task Force: Preliminary Report

In the fall of 1991, the Democratic Party organized a series of town meetings aroung the country designed to focus attention and kindle debate regarding the problem of lack of access to health care. As a result of the Springfield Town Meeting, Congressman Richard Neal asked then Hampden District Medical Society President Mark Mullen to formulate a medical society response to this pressing national problem. Of particular concern was the high infant mortality rate in Springfield. Dr. Murray Watnick, a Westfield radiologist, has volunteered to head a health care access task force. He is joined on the task force by Drs. Douglas Barnshaw, Robert Chircop, Daniel Dress, Greg Slachta, Walter Pacosa and Daniel Teres. The following is a summary of the committee's work thus far:

60 million persons (one out of every four Americans) had no health insurance for part or all of 1991.

March 12, 1992

At this first meeting Dr. Watnick outlined his proposal: the task force would become a study group made up of various area health care professionals. After a suitable period of study the task force would formulate a plan of action in order for HDMS to address the problem locally. Guests at this first meeting included Ms. Elizabeth Canning, Director of Nursing, Springfield Health Department, Ms. Barbara Bergeron, Public Health Nurse, Chicopee Health Department, Ms. Kerin Milesky and Ms. Crystal Hogan of Massachusetts Medical Society (MMS) Regional Office, and Mr. David Pomerantz, Senior Policy Analyst for MMS.

Dr. Watnick reviewed these facts for the group:

1. 60 million persons (one out of every four Americans) had no health insurance for part or all of 1991.
2. Nationwide, 60% of persons eligible for Medicaid *were not treated* because of the lack of state regulation uniformity.
3. In 1991, Americans experienced a 14% increase in health care insurance premiums. Health Maintenance Organization premiums rose 13%.
4. In Massachusetts, 91% of the growth of personal income for the period 1980-1987 was spent on health care.
5. It is estimated that by 1997, $1.5 trillion will be spent on health care nationwide.

At this first meeting, an effort was made to define major factors contributing to the access to health care crisis. The group listed these factors:

1. Defensive medicine.
2. Innovations in treating chronic diseases.
3. Aging of the population.
4. Expensive technology.
5. Use of services: 80% of newly trained physicians are going into specialties. There is no family medicine program at three out of the four Massachusetts medical schools.
6. Structure of the health-care delivery system, especially the massive bureaucracy in billing and accountability.

Mr. Pomerantz gave a report on the MMS perspective on the issue. The MMS Long Range Planning Committee is at work reviewing the American Medical Association's Health Access American Plan and preparing a report for the MMS Executive Committee:

1. A grant application for the Franklin County area on health manpower shortages has been submitted by Wil Lybrand of MMS, working with the Massachusetts Hospital Association and the US Public Health Service.

2. Springfield is one of seven communities across the country selected to participate in a three year federal program funded by the American College of Obstetrics and Gynecology. Kimothy Jones has been named Director of the Springfield project and is working from an office provided by the Massachusetts Department of Public Health in Northampton.

Elizabeth Canning recommended looking at the Connecticut State Health Department's educational media campaigns as a model for Springfield. She also noted the rising number of working poor without Medicaid or health insurance who are falling through the cracks.

April 16, 1992

The results of the March meeting were reviewed and the committee decided to focus on the high infant mortality rate in Western Massachusetts as a symptom and symbol of the health care access crisis.

Dr. Lawrence Lundy, Chairman of the Department of Obstetrics and Gynecology at Baystate Medical Center, was the invited guest at this second Task Force meeting. Dr. Lundy presented the following facts regarding the American College of Gynecologists (ACOG) grant Baystate has received to study infant mortality. Baystate has the maternity Unit for the City of Springfield.

1. The rate of infant mortality for Springfield was the highest in the state in 1991 (the rate had dipped in 1989 but was back up in 1990).
2. 70% of the patients seen by Dr. Lundy's department are receiving Medicaid.
3. In October 1990 there was a 22 day waiting time for a patient to be seen in the obstetrics clinic. With staff increases, this wait has been reduced (in 1991) to five working days.
4. Currently thirty-thousand patient visits are handled by the Baystate Ob-Gyn Clinics each year. There are 14 examining rooms in the clinic. The average patient visit lasts two hours, forty-five minutes, with only 40 minutes actually being given to medical treatment and the rest in waiting. More minority health care professionals are needed.
5. Baystate has started a nurse midwifery school with eight students in the first class. Nurse midwives are now performing 400 teenage deliveries a year. Young mothers relate to the nurses and respond better to them than to a physician.
6. Clinic service at Baystate has been converted to a public health service model program. Tisha Dowe, M.D., M.P.H. (former director of maternal and child health for the state of Hawaii), and Linda White, Ph.D., have been hired to oversee the program.

Continued on next page

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Health Care Acess Task Force

Continued from previous page

7. Initiatives by Dr. Dowe's new department include locating the Certified Nurse Midwife Program in the Springfield neighborhood health centers, as well as the Bridge Academy. An initial analysis of 250 patients is being conducted to define the scope of drug abuse problems during pregnancy. Birth control methods such as the use of Norplant injections are being suggested to patients (Medicaid will pay for Norplant).
8. Ms. Kimothy Jones, Director of the ACOG grant program, is initiating community outreach. Baystate has agreed to support one-third of the ACOG grant and to conduct a patient record analysis.
9. Dr. Lundy recommended that HDMS produce some educational spots and make some investment in community education.

May 21, 1992

The third meeting of the Task Force was held: Invited guests included Linda White, Ph.D., Director of Research and Community Programs for Department of Obstetrics and Gynecology at Baystate. Also present was Kimothy Jones, Director of the Springfield Fetal and Infant Mortality Program. Murray Watnick, M.D., was ready at this point to discuss what role HDMS could play in helping to solve some of the health care access problems in our area. The committee decided to focus on the most vulnerable people in our society—women and children—and to make the reduction of infant mortality a first priority.

Kimothy Jones noted that as part of her study an intensive review would be made of all cases where mothers had lost an infant or fetus, in order to search for root causes. Ms. Jones believes that lack of health care access is a major problem. Outreach and community education are badly needed. She suggested the use of mobile units as a way to bring care to the people in need.

Ms. Wordsworth of the Quaboag Valley VNA was at the meeting. She related that she felt that there were transportation problems in the Palmer area which impeded access to prenatal care for mothers. She said Wing Memorial Hospital had established a once a week clinic to try to address these problems. Mothers in the Palmer area must go to Mary Lane Hospital in Ware, Baystate Medical Center in Springfield or to Southbridge Hospital to deliver their babies.

Dr. Linda White presented a Springfield area fact sheet at this meeting (see following article) Dr. White said a 6 bed detox unit for pregnant women has been designed at Baystate but the state health department has not given their support for Baystate's grant application. Dr. White said a letter of support from HDMS for this 6 bed unit might be helpful.

Dr. Daniel Teres, Task Force member, suggested a breakfast type meeting with community leaders to bring this information to them and to get their opinions as to how to approach these problems which appear to be worse in our community than in other areas. Dr. Teres also planned to speak to Mr. Brodeur at Baystate about which clinics were currently available to treat sexually transmitted diseases (cited as on the rise in Springfield and an important factor in fetal and infant mortality).

June 18, 1992

Dr. Watnick had designed this meeting as an opportunity to speak to those "on the front lines" caring for the groups most affected by health care access crisis.

Ms. Edna Apostal, Director of the Pioneer Valley Area Health Education Center, (AHEC) described the work her agency does in this area. AHEC seeks to increase minority representation in the health field. They work with students teaching them to be future health providers. Tutoring is offered to students in grades seven through twelve. The students are placed in area health settings for 6 weeks each summer. The program was

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established in 1984 in Springfield and in 1986 in Holyoke. The six AMECs across the state work closely with the University of Massachusetts Medical School in Worcester. Ms. Apostal feels that the root causes of poor access to available medical services include poverty, language barriers, education and racism. She is a member of a Health Interpreting Task Force which is working with the area hospitals to improve interpreting services. Ms. Apostal said that HDMS should ask the people who are having the access problems how HDMS might help. She suggested using the Latino Health Council appointed by the Mass Department of Public Health as a resource.

Dr. Jeff Scavron who runs the Brightwood/ Riverview Health Center was an invited guest along with Drs. Balder and Kassis from the Neighborhood Health Center at Mason Square. He cited a lack of outreach workers. All other services operate in the black. Dr. Scavron said there is no way outreach services can be paid for and he could use some help in supporting programs for outreach workers. This could provide highly motivated people to do education in neighborhoods and help accelerate access to care. The group called Our Babies, Our Future was started by The New North Citizens Health Council and the New North Health Center. They have four women from the community who have had special training and earn approximately $20,000 a year. These outreach workers are needed at the rate of one worker for every thirty high risk pregnant women. They can see one person per half day.

Dr. Dowe said Dr. Linda White is at present writing a grant application to provide funding for the education and salary of these types of outreach workers. HDMS could write a letter of support for this grant.

Dr. Dowe felt that prenatal care promotion spots are needed. It was hoped that HDMS could assist the Education Committee of Kimothy Jones' Infant Mortality Task Force in getting their message out to area media for distribution.

Dr. Chircop, new HDMS president, said he will send a letter of support and offer the assistance of our society to the new Health Commissioner for the City of Springfield. Ms. Delores Williams. Dr. Chircop wants to work with the state legislators to try to get them to address the problems of the population without insurance. The committee concluded that the Task Force would pursue community education as a role for HDMS in solving this urgent problem. More on this initiative will be reported in the next issue of the Hippocrat. ■

Brigid Glackin

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Springfield Area Fact Sheet

Socioeconomics

1. Annual per capita income in Springfield is now $11,584 which is 33% below the state per capita income of $17,224.
2. The current four county rate of unemployment is 10.7 compared to 8.6 for the Commonwealth and 7.2 for the nation. These figures do not include the "discouraged" workers and chronic unemployed who are out of the work force but not actively seeking work.
3. For female-headed households with children below five years of age, the poverty rate in Springfield is 67%.
4. Springfield and Holyoke have the state's highest proportions of births to unmarried women (48% and 55% respectively).
5. Fifty-one percent of prenatal care in Springfield is publicly financed (double the state proportion of 25.5%). Prenatal care to teens is 85% publicly financed.

Cultural Diversity

1. The population of Springfield is now 19% African American and 17% Hispanic. Between 1980 and 1990 the Hispanic population doubled from 13,804 to 26,528.
2. In the three prenatal care sites staffed by the Ob-Gyn Department (Wesson Women's, Neighborhood, Brightwood) the total demographic profiles is 47% Hispanic, 33% White, 19% African American and 1% Asian.

Perinatal Health

1. Infant mortality in Springfield continues to exceed state rates by a significant margin. In 1990 the state rate reached a low of 7.0 while Springfield's overall rate was 10.2 and the rate for black infants was 20.3.
2. Springfield has the highest abortion rate in the state.
3. Of the patients who attend BMC's three prenatal care sites, only 59% enter in their first trimester.

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Infectious Diseases

1. Springfield is the only city in the state where sexually transmitted diseases are continuing to rise. The 1991 rates were double and triple the rest of the state, as follows:

	Springfield Area Rate	State Rate
Syphilis	56.1	16.8
Gonorrhea	329.2	99.5
Chlamydia	316.2	171.1

2. The incidence of hepatitis in Springfield for the past three years has been roughly double the overall state rate.
3. AIDS-HIV related hospital discharges in Springfield rose by 29% overall between 1989 and 1990 and by 24% among women. the largest increase was in the white population. (Massachusetts has the 10th highest number of AIDS cases in the U.S.)
4. HIV seroprevalence for newly delivered women in the Western Massachusetts area is 3.4 per 1000 compared to rates of 2.5 per 1000 for the state and 1.5 per 1000 nationally.

Alcohol and Drug Use

1. Springfield has the highest rate of admissions to substance abuse treatment programs of any city in the state—3394 per 100,000 between the years of 1986 and 1990. (Boston's rate is second with 3233 per 100,000.)
2. Rates for alcohol and drug related deaths in the Springfield area are consistently higher than those for the rest of the state. Since 1986 the state rate has been stable at 32-34 per 100,000 while the Springfield rate has increased from 40 to 51 per 100,000.
3. Springfield leads the state in arrests for possession of controlled substances. Since 1986 the rate has been more than double that of any other city in the state.
4. Eighty percent of child abuse/neglect reports from BMC to the Massachusetts Department of Social Services are associated with maternal drug use. Cocaine is the drug of choice in at least 3 out of 4 cases.
5. Over the past four years the number of prenatal patients transferred from the midwifery service to high risk care for drug related reasons has increased by more than 500%. ■

Linda White, Ph.D.
Director of Research,
Division of Community Obstetrics and Gynecology
Baystate

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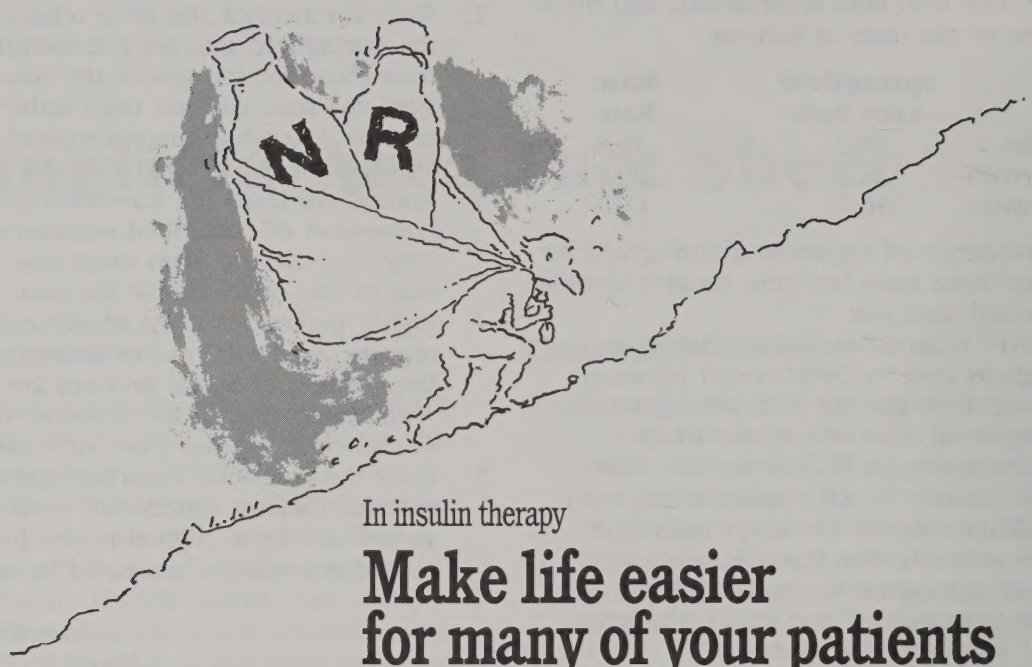

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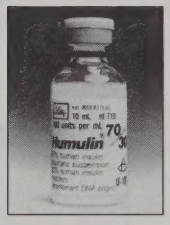

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Executive Committee Activities

Alfred G. Garcia, the author of the following article, has closed his practice in general surgery, and moved to Trinidad, Colorado. He has been of member of HDMS since 1984. He originally practiced in the area as a general surgeon at Medical West. He left there in 1989 to start his own practice at 1221 Main Street, Holyoke. He has served the Medical Society as chairman of the Public Relations Committee, Assistant Secretary and Secretary. His wife Judy, a nurse at Baystate, has been active in the Auxiliary. They can be reached c/o his new practice at Mt. St. Rafael Hospital, 410 Benedicta Avenue, Trinidad, CO 81082.

Pertinent matters that were presented to the Executive Committee included the report of the House Calls Program of March 29th. 970 calls were taken by our physicians. The next program will be on Urology and will be planned for September.

At the Annual Meeting, which a total of 100 members attended, Dr. Rich suggested the reappointment process of physicians to hospitals be streamlined with the use of one form along with a uniform reappointment time. Motion was made and passed that the society make every effort to implement this type of reform. Ms. Audrey DeLoffi of the MMS Central Credentialling Service suggested holding a Breakfast and inviting credentialling committee members, medical staff officers and CEOs to get suggestions on how this could be done.

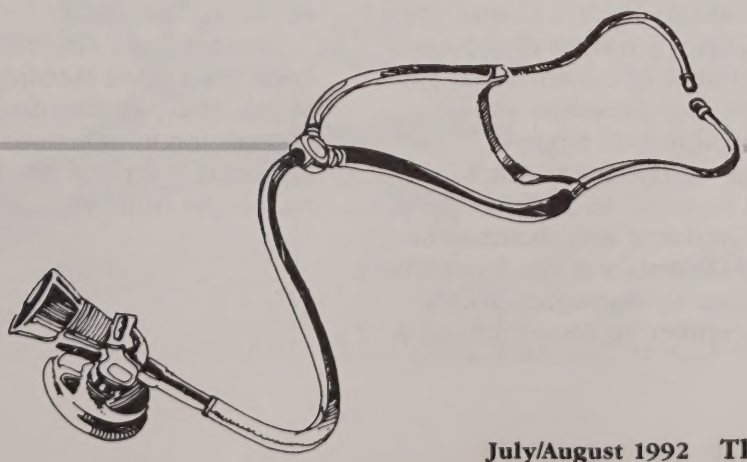
At the MASSPRO meeting of March 31st, approximately 40 physicians attended the meeting. Dr. Mullan recommended that all MASSPRO proceedings be taped and that an Oversight Committee be established to review the proceedings.

The Medico-Religious Committee meeting was held on April 6th. Discussed was the October 14th Medical Ethics Seminar and how the audience would be broken into groups to discuss case studies. A Facilitators' meeting will be held before the program to review the case study.

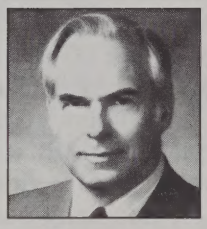
The Medico-Legal Committee met on April 9th. Attorneys Bagley and Ziter submitted sample letters of requests for written reports from physicians. A Joint Educational Program will be in the making for the Fall. It is hoped Risk Management Credits can be provided for physicians.

More discussion on approaching judges to set more convenient trial dates was done with a subcommittee being formed and a meeting scheduled with Judge Constance Sweeney.

The Public Health Committee met on April 14th with the main thrust being the idea that a physician be appointed to the position of Springfield Public Health Commissioner. The Executive Committee will be approached in order to write a letter to Mayor Markel to initiate the suggestion. ■



From the MMS Regional Office



William E. Callahan, M.D., elected President of the Massachusetts Medical Society.

William E. Callahan, M.D. an obstetrician-gynecologist at Franklin Medical Center in Greenfield, was elected president of the Massachusetts Medical Society (MMS) at the Society's Annual Meeting on May 8, 1992. Doctor Callahan will serve a one-year term as president of the MMS.

In his first action as MMS president, Doctor Callahan announced his plans for a MMS campaign to address domestic violence in Massachusetts. Doctor Callahan appointed a special committee that will recommend programs for physicians to increase knowledge of domestic violence and expand community resources to treat it.

He also will focus on the problems of AIDS and teenage pregnancy during his tenure and continue the Society's activities on improving access to health care. "All these issues have reached crisis proportions in our country today, "Doctor Callahan noted. "It is imperative that physicians take a leadership role in solving them—through education and coordinated activities with legislators, citizens, and other health care professionals."

Affiliated with Franklin Medical Center since 1971, Doctor Callahan is a former chairman of the Center's Department of Obstetrics, as well as former president, vice president and secretary of the medical staff. Since 1975, he has enjoyed courtesy privileges at Athol Memorial Hospital in Athol. In addition, he is a past medical staff president and chairman of the Department of Obstetrics at the former Farren Memorial Hospital in Montague. Doctor Callahan is board certified in obstetrics and a Fellow of the American College of Obstetrics and Gynecology.

A graduate of Tufts University, Doctor Callahan received his M.D. from the Tufts University School of Medicine. He completed his internship and the first year of a family practice residency at the Maine Medical Center in Portland, Maine, and a residency in obstetrics and gynecology at the Tripler Army Medical Center in Honolulu, Hawaii. He completed his tour of duty with the U.S. Air Force Medical Center, Wright-Patterson Air Force Base in Dayton, Ohio, in August 1971, achieving the rank of Lieutenant Colonel. He has been a clinical instructor in the Department of Obstetrics and Gynecology at Tufts since 1974.

The Society's new president has long been active in organized medicine. He is currently an alternate delegate to the American Medical Association and has just completed a one-year term as MMS president-elect. He is also a member of the MMS Executive Committee, has served as chairman of the Society's Committee on Legislation, and as a member of the Committee on Professional Liability. He also is a member and past president of the Franklin District Medical Society. In addition, Doctor Callahan is a corporator of the Franklin Medical Center.

Doctor Callahan, and his wife Gail, a nurse, reside in Greenfield.

Other officers elected for 1992-1993 at the Society's Annual Meeting include Leonard J. Morse, M.D., an internist from Worcester specializing in infectious diseases, as president-elect and Francis X. VanHouten, M.D., a radiologist from Wellesley, as vice president. ■

Kerin L. Milesky
Regional Coordinator
Massachusetts Medical Society

Lawrence V. Selden

Dr. Lawrence V. Selden, 70, of Springfield, a surgeon on the staffs of Baystate Medical Center and Mercy Hospital, died Monday, June 29, 1992 at the Veterans Administration Medical Center in Leeds (Northampton). He actively practiced surgery until March 18 of this year, when he suffered a heart attack (requiring urgent cardiac surgery), followed by a series of strokes.

He practiced at 34 Mulberry Street, Springfield for the past 40 years, and was a past Chief of Surgery at Wesson Memorial Hospital.

Born in Springfield, Dr. Selden received a bachelor's degree from Tulane University in 1942, and his medical degree from the Tulane Medical School in 1945. He served his surgical internship at Beth Israel Hospital in Boston in 1945-46.

He was a resident-in-surgery at the Alexander Blain clinic in Detroit in 1948-1949 and 1949-1950 at Cooley Dickenson Hospital in Northampton. From 1950 to 1952 he was a Fellow in Surgery at University Hospital in Ann Arbor, Michigan. He was an instructor in surgery at the Tufts University School of Medicine and participated in the training of surgical residents locally since 1977, when Wesson Memorial Hospital merged with Springfield Hospital to form Baystate Medical Center.

Dr. Selden served as Chief of Surgery for the Army Medical Corps at the Aleutian Islands Hospital at Adak, Alaska. He also commanded the Hospital Train Unit at Camp Kilmer, New Jersey.

He was a Diplomate of the American Board of Surgery, A Fellow of the American College of Surgeons, and a member of the International College of Surgeons. He joined the Hampden District Medical Society in 1952. He was also a past president of the Pavlov Medical Society and the Maimonides Medical Society.

Dr. Selden leaves his wife, the former Claire Casler, an artist for 35 years; a son, Dr. Reid V. Selden, of Hauppauge, New York; two daughters, Attorney Patricia Selden of Toronto, Canada and Judge Stacey Selden of Manhattan, New York; a brother Leonard of Kansas City, Missouri; and five grandchildren.

According to Dr. Selden's wishes, he was cremated and his ashes sprinkled in the garden of the Red Lion Inn in Stockbridge because of his love of the Berkshires.

A memorial service is planned by the family for the fall. Memorial contributions may be made to the American Heart Association, 20 Speen Street, Framingham, MA 01701-4080. ■

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HDMS Dates To Remember 1992-1993

District Meetings

Tuesday, September 22, 1992—Delaney House, Holyoke, MA
Tuesday, January 26, 1993—Sheraton Springfield, Springfield, MA
Tuesday, April 20, 1993—Storrowtown Tavern, West Springfield, MA

Executive Committee Meetings

September 17	January 21, 1993	April 15
October 15	February 18	May 20
November 19	March 18	June 17
December 17		

State Executive Board Meetings
Wednesdays—Society Headquarters—Waltham, MA

June 10, 1992	November 18, 1992	March 10, 1993
September 16, 1992	January 13, 1993	April 14, 1993

State Council Meetings

October 14, 1992, Springfield Marriott, Springfield, MA —Wednesday
February 10, 1993, Marriott, Burlington, MA—Wednesday
May 14, 1993, Westin Hotel—Copley Place, Boston, MA—Friday
May 15, 16, 1993, Westin Hotel—Copley Place, Boston, MA—MMS Annual Meeting

Pre-Council Meetings

Monday, October 5, 1992—5:30 p.m. HDMS Office, 1111 Elm St., West Springfield
Thursday, February 4, 1993—5:30 p.m. HDMS Office, 1111 Elm St., West Springfield
Thursday, May 6, 1993—5:30 p.m. HDMS Office, 1111 Elm St., West Springfield

American Medical Association Annual Convention

June 21-25, 1992—Chicago
June 13-17, 1993—Chicago
June 12-16, 1994—Chicago
1995—To Be Announced

American Medical Association Interim Session

December 6-9, 1992—Nashville, Tennessee
December 5-8, 1993—New Orleans, Louisiana
December 4-7, 1994—Honolulu, Hawaii
December 3-6, 1995—Washington, D.C.

February 12-14, 1993 LEADERSHIP CONFERENCE Atlanta, Georgia
February 11-13, 1994 LEADERSHIP CONFERENCE San Francisco, California

October 14, 1992 MEDICAL ETHICS SEMINAR Deliso Center, Mercy Hospital 6:30 p.m.

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New Members Welcome

Debra G. Knee, M.D.
Baystate Medical Center
759 Chestnut Street
Springfield, MA 01199

Born: November 6, 1963
Premed: Boston University 1980-1984
Medical: Albany Medical College 1987-1991
Internship: Baystate Medical Center 1991-present

Specialty: Obstetrics/Gynecology
Resident

Peter D. Masso, M.D.
Shriner's Hospital
516 Carew Street
Springfield, MA 01104

Born: August 17, 1957
Premed: University of Connecticut School of Pharmacy 1975-1980
Medical: University of Connecticut School of Medicine 1981-1985
Internship: UCONN Combined Surgical Residency Program, Hartford Hospital 1985-1986
Residency: UCONN School of Medicine, Dept. of Orthopedics 1986-1990
Fellowship: Vanderbilt University 1990-1991
Specialty: Orthopedic Surgery/Pediatric Orthopedics

Louis G. Petcu, M.D.
10 Hospital Drive
Holyoke, MA 01040

Born: January 8, 1955
Premed: University of Pennsylvania College of Arts & Science 1972-1977
Medical: University of Pennsylvania 1981-1985
Internship: Yale-New Haven Hospital, Connecticut 1985-1986
Residency: Yale-New Haven Hospital 1986-1990
Specialty: Otolaryngology/Head & Neck Surgery

Usman M. Qayyum, M.D.
77 Winsor Street
Ludlow, MA 01056

Born: March 14
Premed: Cadet College, Pakistan 1971-1973
Medical: King Edward School of Medicine, University of Punjab, Pakistan 1973-1980
Internship: Mayo Hospital/SGR Hospital 1980-1981
Residency: Norwich Hospital, Connecticut 1982-1985
Fellowship: Berkshire Medical Center, MA 1985-1986
Specialty: Psychiatry

Philip M. Monteleone, M.D.
Baystate Medical Center
759 Chestnut Street
Springfield, MA 01199

Born: April 3, 1959
Premed: LaSalle College, Pennsylvania 1977-1981
Medical: Temple University, Pennsylvania 1981-1985
Internship: Medical College of Virginia 1985-1986
Residency: Medical College of Virginia 1986-1988
Fellowship: University of Iowa Hospital and Clinics 1988-1991
Specialty: Pediatric Hematology/Oncology

Scott M. Halista, M.D.
50 Maple Street
Springfield, MA 01103

Born: December 14, 1959
Premed: Pennsylvania State University 1977-1980
Medical: Jefferson Medical College, Pennsylvania 1978-1982
Internship: Medical Center of Delaware 1982-1983
Residency: Medical Center of Delaware 1983-1985
Fellowship: Walter Reed Army Medical Center, Washington, D.C. 1988-1990 (Rheumatology)
Specialty: Rheumatology

Continued on next page

New Members Welcome

Continued from previous page

Steven T. Berger, M.D.
275 Bicentennial Highway
Springfield, MA 01118

Born: August 31, 1959
Premed: Brown University, Rhode Island 1977-1981
Medical: Cornell University Medical College 1981-1985
Internship: Brigham & Women's Hospital, Boston 1985-1986
Residency: Manhattan Eye, Ear & Throat Hospital, New York 1986-1989
Fellowship: UCLA Medical Center, California 1989-1990
Specialty: Ophthalmology/Corneal & External Diseases

Rajwani K. Malhotra, M.D.
55 Lake Avenue North
Worcester, MA 01605

Born: February 8, 1948
Premed: Punjab University, India 1963-1965
Medical: Medical College Rohtak, Haryana, India 1965-1969
Internship: Medical College Hospital, India 1970
Residency: Baystate Medical Center 1974-1978
UMass Medical Center 1979-1980
Fellowship: UMass Medical Center 1980-1981 Dermatopathology
Yale University 1987-1988 Dermatopathology
Specialty: Pathology/Dermatopathology

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In Memoriam

Dr. Celilia A. (O'Farrell) Bush, 74, of 107 Main St., a retired doctor of obstetrics and pediatrics, died May 30, 1992 at Baystate Medical Center in Springfield.

She and her husband, the late Dr. James Bush, established a family practice in 1946.

For many years, Dr. Cecilia made house calls to patients in Brookfields and Belchertown, Holland, Monson and Wilbraham.

She was the school physician in Monson and surrounding communities for many years before retiring in 1986.

She was also affiliated with Mary Lane Hospital in Ware from 1946 until her retirement. She served in many positions there, including chief-of-staff, and received the hospital's distinguished service award.

She was also affiliated with Wing Memorial Hospital in Palmer from 1946 to 1967.

Born in Boston, she was a graduate of Mount St. Joseph Academy in Brighton and Regis College in Weston. She received an alumna Achievement award from Regis in 1986.

Dr. Cecilia received her doctorate from Tufts University Medical School in Medford.

Her husband died in 1987.

She leaves three sons, James F. Jr. of East Longmeadow, Jonathan M. of Annandale, N.J., and Jerome S. of Alexandria, VA; two daughters, Jo Ellen Mannix of Marshfield and Jennifer A. Bush of Norwell; a brother, Walter V. of Harwich, and two grandchildren.

Dr. Nelson Newmark, 85, of Sarasota, formerly of Longmeadow, MA, a retired 39-year pediatrician in Springfield, MA, died Thursday, June 25, 1992 in Sarasota. He retired in 1973.

Born in Morristown, N.J., he lived in Longmeadow for many years before moving to Florida in 1973.

He was a graduate of New York University in New York City and Yale Medical School in New Haven, CT.

He served in the Army Air Forces in the Tampa Bay, FL area for 3½ years during World War II.

He leaves his wife, the former Marjorie Goldstein; two daughters, Edna Newmark of Boston and Lois Saltman of California, and two grandsons, Joshua Saltman and Benjamin Saltman ■

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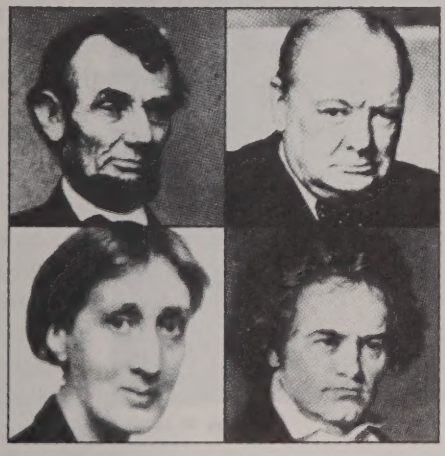

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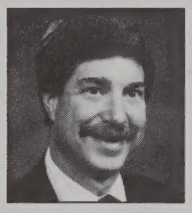

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Arthur W. Price

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Attorney
Michele J. Feinstein

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Hampden District Medical Society

Statement of Revenue and Support, Expenses and Changes in Fund Balance
Year Ended March 31, 1992
(with comparative totals for the year ended March 31, 1991)

	Year Ended March 31, 1992				Memo Only
	General Operating (Expendable)	Hampden Hippocrat (Designated)	Fixed Asset Funds	Total	Year Ended March 31, 1991
Revenue and Support					
Membership dues and assessment	$ 114,715	$	$	$ 114,715	$ 110,375
Lectures and other revenue	2,994			2,994	4,804
House calls program revenue	10,000			10,000	
Interest income	5,207			5,207	6,503
Circulation income		18,457		18,457	14,793
Total revenue and support	132,916	18,457		15,373	136,475
Expenses					
Salaries	48,544			48,544	44,674
Printing	3,806	17,628		21,434	21,807
Equipment and maintenance	5,197			5,197	11,911
Public relations	13,632			13,632	11,229
Miscellaneous	5,875			5,875	8,184
Rent	12,271			12,271	9,460
District meetings	8,052			8,052	7,217
Employee benefits and taxes	6,423			6,423	6,150
Springfield Academy of Medicine					4,550
Scholarships	4,000			4,000	4,400
Telephone	3,786			3,786	4,254
Travel	255			255	3,651
Postage	2,851			2,851	3,309
Supplies	1,478			1,478	2,661
Committees	1,760			1,760	1,634
Accounting fee	2,000			2,000	2,000
Honorarium	1,172			1,172	435
House calls program	10,180			10,180	
Depreciation			200	200	200
Service charges		163		163	245
Consulting		260		260	141
Total expenses	131,282	18,051	200	149,533	148,112
Excess/(Deficiency) of Revenue and Support Over Expenses	1,634	406	(200)	1,840	(11,637)
Fund Balance—Beginning of Year	42,110	958	200	43,268	54,905
Fund Balance—End of Year	$ 43,744	$ 1,364	$ —	$ 45,108	$ 43,268

See accountant's compilation report

The Last Word

This issue of the Hampden Hippocrat features the efforts of one of our members—Dr. Murray Watnick—to educate himself and ultimately us all about a pressing local health problem: The stubbornly high infant mortality rate in the City of Springfield. Murray concludes that he and fellow HDMS members can have an impact on this issue by launching certain public education programs. You'll hear more about this initiative in our September—October issue.

Meanwhile...

Most of our local hospitals are involved in what I feel is a fratricidal struggle to become "the hospital of choice" of various third-party payers to the exclusion of their sister institutions. This grand scheme to produce higher quality patient care through free-for-all competition between our local hospitals has been heartily endorsed by Governor Weld and State Representative Carman Buell (Greenfield), Chair of the House Health Care Committee. What does this have to do with the lack of access to prenatal care and high infant mortality rates? Well, in order to secure exclusive contracts with various HMOs and PPOs, local hospitals (as well as others throughout the state) are scrambling to develop maternity units so they will be "full service Hospitals." It's hard to imagine that while hospitals are busy building new maternity facilities—whether they focus on state-of-the-art technology or better cuisine, lighting and interior decorating—that there will be funds to spare in order to launch new initiatives designed to bring prenatal and infant outpatient care to the un- and underinsured. (Regarding this struggle between local hospitals the HDMS Executive Committee has thankfully remained neutral, confining itself to advocacy for our patients.)

What is missing here at the **HIPPOCRAT** is input from you and other members like you. Therefore, I'm offering you this space in future issues. Look around. This space holds about 750 words, or three typewritten pages of text. It's impossible for me to believe that the highly individualistic, opinionated physicians *I* know and love to work with have nothing to say about all of this—or any number of other subjects.

Probably you think you don't have time.

Actually, that excuse is particularly unacceptable to me, having just completed a "maternity leave" for my fourth child and returned to my solo general surgery practice. It likewise doesn't cut any ice with my co-editor, Don Higby. This past spring, two of Don's three partners left the department he chairs at Baystate—one permanently, the other temporarily in order to have twins.

I suggest taping us your thoughts the next time you're dictating your correspondence or office notes. Mail the tape or the text itself to:

The Editors, Hampden Hippocrat
c/o Carol Nystrom, Executive Secretary
HDMS
1111 Elm Street
West Springfield, MA 01189

Or, fax something over to Carol at (413) 731-8990. You can even just call Carol at 736-0661 and let her know when I could call you back and tape what you have to say over the phone.

So think about it...

YOUR NAME THIS SPACE—THE LAST WORD

I can't wait to hear from you. ■

Brigid Glackin

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Loyalty Group Insurance

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Underwrtten by Commercial Life Insurance Company, 15 Corporate Place South, Piscataway, NJ 08854 • (908) 562-2400

Vanguard
Medical Management Services

Reimbursement Quiz

(Please check True or False)

T	F	
☐	☐	Coding, billing and reimbursement are our easiest tasks
☐	☐	Adjusting to RBRVS was easy
☐	☐	We enjoy maintaining multiple sets of procedure codes
☐	☐	We look forward to another computer system upgrade
☐	☐	Our claims are never arbitrarily denied
☐	☐	We enjoy hearing "All our agents are busy now, please hold"
☐	☐	Insurance carriers are always consistent in handling our claims
☐	☐	It's getting easier to control the business side of our practice

If you answered the questions *"True"*
we'd really like to talk to you,
if not,
you should be talking to us.

We Solve Reimbursement Problems

Vanguard Medical Management Services
512 West Main Street • Shrewsbury, MA 01545-2253

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